

# Oral Surgery

1. ....is one of the vertical buttresses of the mid face.

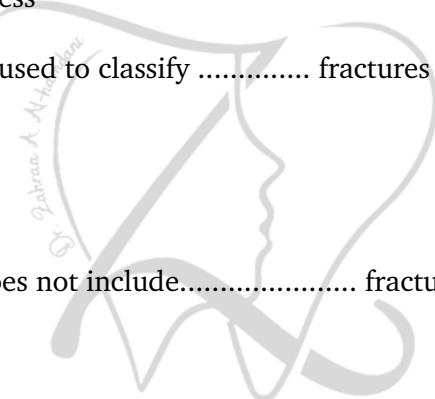
- A. Infra-orbital rim
- B. Frontal bar
- C. Zygomatic arch
- D. Zygomaticomaxillary buttress**

2. ....is one of the horizontal buttresses of the mid face.

- A. Zygomaticomaxillary buttress
- B. Nasomaxillary buttress
- C. Zygomatic arch**
- D. Pterygomaxillary buttress

3. Le fort classification is used to classify ..... fractures

- A. Mid-face**
- B. Mandibular
- C. Orbital
- D. zygomatic



4. Le fort classification does not include..... fracture

- A. Le fort I
- B. Le fort II
- C. Le fort III
- D. Le fort IV**

5. .... fracture is also known as Guerin or Low - level fracture.

- A. Lefort I**
- B. Le fort II
- C. Le fort III
- D. Le fort IV

6. In Le fort I fracture, the pterygoid plates are fractured at.....

- A. The root
- B. halfway
- C. The junction of the lower one-third with the upper two-third.**
- D. The pterygoid plate in intact and not involved

# Oral Surgery

7. In Le fort II fracture, the pterygoid plates are fractured at.....

A. The root

**B. halfway**

C. The junction of the lower one-third with the upper two-third.

D. The pterygoid plate in intact and not involved

8. In Le fort III fracture, the pterygoid plates are fractured at.....

**A. The root**

B. halfway

C. The junction of the lower one-third with the upper two-third.

D. The pterygoid plate in intact and not involved

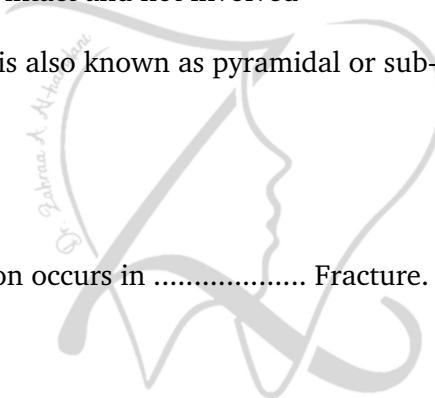
9. .... fracture is also known as pyramidal or sub-zygomatic fracture.

A. Le fort I

**B. Le fort II**

C. Le fort III

D. Le fort IV



10. craniofacial disjunction occurs in ..... Fracture.

A. Le fort I

B. Le fort II

**C. Le fort III**

D. Le fort IV

11. Guerin sign is the .....

*Dental Student*

A. Presence of intraoral ecchymosis over the zygomaticomaxillary buttress.

B. Presence of cracked pot' percussion sound from upper teeth.

**C. Presence of Palatal ecchymosis.**

D. Presence of diplopia

12. CSF rhinorrhea is more common in ..... fracture rather than .....fracture.

A. Le fort I, Le fort II

B. Le fort II, Le fort III

C. Le fort II, Le fort I

**D. Le fort III, Le fort II**

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13. Mobility of the zygomaticomaxillary complex , classic dish face deformity and facial elongation occur in .....fracture.

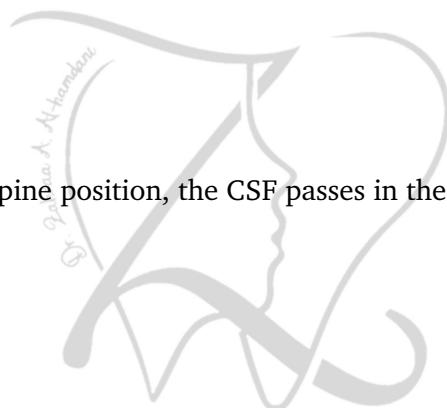
- A. Le fort I
- B. Le fort II
- C. Le fort III**
- D. Le fort IV

14. Testing the discharge for ..... is the best available diagnostic method for CSF

- A. Glucose
- B. Protein
- C. beta-1 transferrin
- D. beta-2 transferrin**

15. If the patient is in supine position, the CSF passes in the pharynx giving ..... taste.

- A. Salty
- B. Sugar
- C. Metallic
- D. Salty metallic**



16. campbell and trapnell lines are used to diagnose mid face fracture when ..... is used.

- A. Water's view**
- B. Town's view
- C. Submentovertix view
- D. CT

17. ..... is the only plain view that clearly demonstrates a Le Fort I fracture.

- A. Water's view
- B. Town's view
- C. Submentovertix view
- D. Lateral projection.**

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18. When performing fixation of mid face fracture, .....is only used for Le fort I fracture.

- A. Pyriform fossa wiring
- B. Infraorbital rim suspension wiring
- C. Circumzygomatic wiring
- D. Supraorbital rim suspension wiring

19. When performing fixation of Le fort III fracture, .....is the only method that can be used.

- A. Pyriform fossa wiring
- B. Infraorbital rim suspension wiring
- C. Circumzygomatic wiring
- D. Supraorbital rim suspension wiring

20. In the case ORIF for Le fort I, miniplate(s) should be applied at.....

- A. Nasomaxillary buttress
- B. Zygomaticomaxillary buttress
- C. Nasomaxillary & zygomaticomaxillary buttresses
- D. Frontonasal suture

21. In the case ORIF for Le fort II, additional fixation should be applied at.....

- A. Frontonasal suture
- B. Infraorbital rim
- C. Frontotemporal suture
- D. A & B

22. In the case ORIF for Le fort II, miniplate(s) should be applied at.....

- A. frontozygomatic suture
- B. frontonasal suture
- C. nasomaxillary buttress
- D. A & B

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23. The surgical exposure of Le fort I requires.....

- A. Intra oral vestibular incision
- B. Midfacial 'degloving' approach
- C. Subciliary incision
- D. Coronal approach

24. Midfacial 'degloving' approach is used to treat ..... Fracture

- A. Le fort I
- B. Le fort II
- C. Le fort III
- D. Isolated zygomatic arch fracture

25. coronal scalp flap is used to treat ..... Fracture

- A. Le fort I
- B. Le fort II
- C. Le fort III
- D. Isolated zygomatic arch fracture

26. Diplopia caused by Soft tissue entrapment in the orbital floor is determined by .....

- A. Visual field (confrontation) testing
- B. Retinal examination
- C. forced duction test.
- D. Fundoscopy

27. ....is helpful for evaluation of the zygomatic arch.

- A. Submentovertex view
- B. Water's view
- C. Town's view
- D. Reverse Town's view

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28. .... is the gold standard for zygomatic fractures.

- A. Submentovertex view.
- B. Water's view.
- C. Town's view.
- D. CT.

29. Indirect reduction of recent zygomatic fracture can be performed if it occurred within ..... weeks

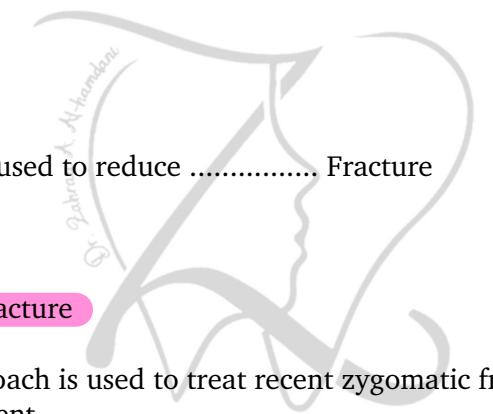
- A. 1-2
- B. 2-3
- C. 3-4
- D. 4-5

30. Gillies approach is used to reduce ..... Fracture

- A. Le fort I
- B. Le fort II
- C. Le fort III
- D. Recent zygomatic fracture

31. percutaneous approach is used to treat recent zygomatic fractures with ..... displacement

- A. medial
- B. lateral
- C. superior
- D. inferior



*Dental Student*

32. Which of the following could cause CSF rhinorrhea in nasal fracture patient?

- A. Fracture of nasal septum
- B. Fracture of ethmoid bone
- C. fracture of sphenoid bone
- D. fracture of lacrimal bone

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33. In orbital fracture, the patient may have Epiphora. which of the following best describes Epiphora?

- A. bleeding from the eye
- B. bleeding underneath conjunctiva
- C. bleeding posterior to the orbit
- D. tear overflow**

34. which of the following bones majorly contributes to formation of the orbital floor?

- A. Zygomatic bone
- B. Maxillary bone
- C. Ethmoid bone**
- D. lacrimal bone

35. For most cases of orbital fracture , intervention should be done immediately to avoid long term complications. In children, intervention should be delayed for 7 to 10 days

- A. both statements are false**
- B. both statements are true
- C. The first statement is true & the second is false
- D. The first statement is false & The second is true

36. Diplopia would result if fracture line around zygomatico-frontal suture passes:

- A. Below the whitnall's tubercle
- B. above the whitnall's tubercle**
- C. Through zygomatico-frontal suture
- D. Tearing the periosteum of orbital surface of zygomatic bone

37. Incisions for the surgical exposure of the frontozygomatic suture:

- A. Transconjunctival Incision
- B. Lateral eyebrow (supraorbital eyebrow)**
- C. Retromandibular incision
- D. None of the above

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38. A patient present with lateral subconjunctival hemorrhage. Infraorbital step and diplopia on right side with inability to open mouth, he can be having :

- A. Fracture subcondylar right side
- B. Fracture zygoma right side**
- C. Fracture of floor of orbit
- D. None of the above

39. Guerin sign is presence of:

- A. Ecchymosis at mastoid area
- B. Ecchymosis at greater palatine foramen area**
- C. Ecchymosis in zygomatic buttress
- D. Ecchymosis in sublingual area

40. The Gillies approach is used to gain access to the following bone;

- A. Nasal bone.
- B. Zygomatic bone.**
- C. Maxilla.
- D. Temporal bone.
- E. Frontal bone.

41. A Le Fort I fracture is;

- A. Transverse fracture of the maxilla.**
- B. Pyramidal fracture of the maxilla.
- C. Craniofacial dysfunction.
- D. Fracture of the zygomatic arch.
- E. All the above are correct.

42. Submentovertex view is helpful for evaluation of:

- A. Zygomatic body fracture.
- B. Zygomatic complex fracture
- C. Zygomatic arch fracture.**
- D. Orbital floor fracture.
- E. Orbital roof fracture.

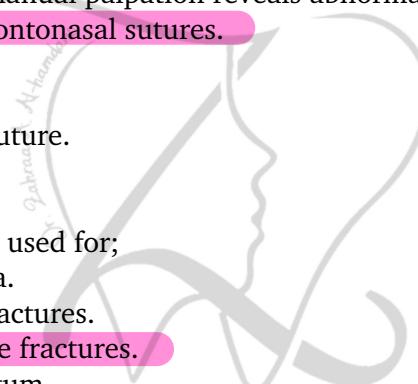
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43. One of the following features of orbital fractures is correct

- A. Blow-in orbital floor fractures are more common than blow-out fractures
- B. Both the lateral wall and the roof are the most common areas of orbital fracture.
- C. Pure blow-out orbital floor fractures involve concomitant fracture of the orbital rim.
- D. In orbital floor fractures, diplopia results mainly due to interference with the action of superiores rectus muscle
- E. Displacement of orbital fat through the orbital floor defect may result in enophthalmos.**

44. Le Fort III fracture bimanual palpation reveals abnormal mobility at the:

- A Frontorygomatic and frontonasal sutures.**
- B. Frontorygomatic only.
- C. Frontonasal only.
- D. Zygomaticomaxillary suture.
- E. Palatal suture.



45. Walsham's forceps are used for;

- A. Disimpaction of maxilla.
- B. Reduction of maxilla fractures.
- C. Reduction of nasal bone fractures.**
- D. Reduction of nasal septum.
- E. Reduction of zygoma.

46. The best available diagnostic method of detection of CSF rhinorrhea is:

- A. Testing the discharge for B-2 transferrin.**
- B. Testing the discharge for glucose.
- C. Salty metallic test if the patient in supine position.
- D. Classical tramline pattern.
- E. None of the above.

47. A common complication of nasal fractures that must be urgently treated is:

- A. Loss of sense of smell.
- B. Septal hematoma.**
- C. Periorbital edema.
- D. Subcutaneous edema.

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48. Craniofacial dysjunction is seen in:

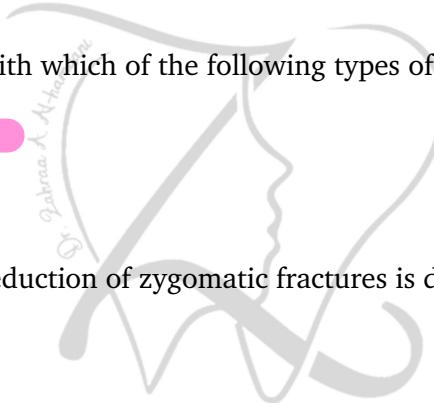
- A. LeFort III fracture.
- B. Guerrin's fracture.
- C. High LeFort I fracture.
- D. None of the above.

49. The "hanging drop appearance" in maxillary sinus radiograph indicated:

- A. A nasal polyp.
- B. A blowout fracture of orbit.
- C. The radiograph artifact.
- D. An antrolith.

50. Paresthesia is seen with which of the following types of fractures?

- A. Subcondylar
- B. Zygomatico maxillary
- C. Coronoid process
- D. Symphyseal



51. Gillis approach for reduction of zygomatic fractures is done through:

- A. Temporal fossa.
- B. Infratemporal fossa.
- C. frontal bone.
- D. All of the above.

52. The indications for treatment of Zygomatic complex fractures are :

- A. Restore the normal contour of the face.
- B. To correct diplopia.
- C. To remove any interference with the range of movement of the mandible.
- D. All of the above.

53. On palpation there is step at bilateral infraorbital margins and mobility of midface is detectable at nasal bridge possible diagnosis would be fracture :

- A. Le Fort 1.
- B. Le Fort II.
- C. Le Fort III.
- D. All of the above.